

## Electronic Patent Application Fee Transmittal

|   |   |                 |               |                             |
|---|---|-----------------|---------------|-----------------------------|
| <b>Application Number:</b>                              | 10582124  |                 |               |                             |
| <b>Filing Date:</b>                                     | 10-May-2007   |                 |               |                             |
| <b>Title of Invention:</b>                              | Use Of A Hydroximic Acid Halide Derivative In The Treatment Of Neurodegenerative Diseases |                 |               |                             |
| <b>First Named Inventor/Applicant Name:</b>             | Linda Greensmith  |                 |               |                             |
| <b>Filer:</b>   | Christopher Thomas Radom/Maria Marley   |                 |               |                             |
| <b>Attorney Docket Number:</b>                          | CytRx/012   |                 |               |                             |
| Filed as Small Entity                                   |   |                 |               |                             |
| <b>U.S. National Stage under 35 USC 371 Filing Fees</b> |   |                 |               |                             |
| <b>Description</b>                                      | <b>Fee Code</b>   | <b>Quantity</b> | <b>Amount</b> | <b>Sub-Total in USD(\$)</b> |
| <b>Basic Filing:</b>                                    |   |                 |               |                             |
| <b>Pages:</b>   |   |                 |               |                             |
| <b>Claims:</b>  |   |                 |               |                             |
| <b>Miscellaneous-Filing:</b>                            |   |                 |               |                             |
| <b>Petition:</b>  |   |                 |               |                             |
| <b>Patent-Appeals-and-Interference:</b>                 |   |                 |               |                             |
| <b>Post-Allowance-and-Post-Issuance:</b>                |   |                 |               |                             |
| <b>Extension-of-Time:</b>                               |   |                 |               |                             |
| Extension - 2 months with \$0 paid                      | 2252  | 1               | 245           | 245                         |

| Description                       | Fee Code | Quantity | Amount | Sub-Total in USD(\$) |
|-----------------------------------|----------|----------|--------|----------------------|
| Miscellaneous:                    |          |          |        |                      |
| Request for continued examination | 2801     | 1        | 405    | 405                  |
| Total in USD (\$)                 |          |          |        | 650                  |